Case 07-14044 Official Form 1 (04/07)

Tirado, Isabel

Name of Debtor (if individual, enter Last, First, Middle):

All Other Names used by the Debtor in the last 8 years $\,$

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United States Bankruptcy Court

Northern District of Illinois

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Name of Joint Debtor (Spouse) (Last, First, Middle):

All Other Names used by the Joint Debtor in the last 8 years

Desc Main

Voluntary Petition

| (include married, maiden, and trade names): None | | (include married, maiden, and trade names): | | | | |
|--|--|---|---|---|---|--|
| Last four digits of Soc.Sec.No./Complete EIN or other Tax ID No. (if more than one, state all): 2579 | | | Last four digits of Soc.Sec.No./Complete EIN or other Tax ID No. (if more than one, state all): | | | |
| Street Address of Debtor (No. and Street, City, a 1536 N. Mohawk Chicago, IL | ZIPCODE 60610 | Street Addres | ss of Joint Debtor (No. ar | nd Street, City, and St | ZIPCODE | |
| County of Residence or of the Principal Place of | | County of Re | esidence or of the Princip | al Place of Business: | | |
| Cook Mailing Address of Debtor (if different from stre | eet address): | Mailing Add | ress of Joint Debtor (if di | ifferent from street ad | dress): | |
| | ZIPCODE | _ | | | ZIPCODE | |
| Location of Principal Assets of Business Debtor | (if different from street address a | above): | | | ZIPCODE | |
| Type of Debtor (Form of Organization) (Check one box) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (if debtor is not one of the above entities, check this box and state type of entity below) | Nature of Business (Check one box) Health Care Business Single Asset Real Estate as de 11 U.S.C. § 101 (51B) Railroad Stockbroker Commodity Broker Clearing Bank Other Tax-Exempt Entit (Check box, if applica | EY able) anization d States | Chapter 7 Chapter 9 Chapter 11 Chapter 12 Chapter 13 | rred by an rily for a | one box) Petition for of a Foreign ding Petition for of a Foreign | |
| Filing Fee (Check one by Full Filing Fee attached Filing Fee to be paid in installments (Application for the court's consideration to pay fee except in installments. Rule 1006 Filing Fee waiver requested (applicable to chattach signed application for the court's consideration for the court's consideration. | able to individuals only) Must a on certifying that the debtor is un (b). See Official Form No. 3A. napter 7 individuals only). Must | ttach able Down Check | ebtor is a small business ebtor is not a small busin | ness as defined in 11 Untingent liquidated deles) are less than \$2,19 this petition. | J.S.C. § 101(51D) bts (excluding debts 20,000 | |
| Statistical/Administrative Information Debtor estimates that funds will be available for dist Debtor estimates that, after any exempt property is expenses paid, there will be no funds available for dist Estimated Number of Creditors 1- 50- 100- 200- 100- 49- 99- 199- 999- 500- 100- 100- 100- 100- 100- 100- 100 | excluded and administrative distribution to unsecured creditors. 00- 5,001- 10,001- | 25,001- 50 | 0,001- OVER 00,000 100,000 | _ i | FOR COURT USE ONLY | |
| Estimated Assets \$0 to \$10,000 to \$100,000 to \$100,00 | | \$1 million to | ☐ More than \$100 millio | on | | |

\$1 million to \$100 million

More than \$100 million

\$100,000 to

Estimated Liabilities

\$50,000 to

\$100,000

\$0 to \$50,000

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|--|---|---|----------------------------------|--|--|--|
| Voluntary Pe (This page must be | tition completed and filed in every case) | Page 20154 Name of Debtor(s): Isabel Tirado | | | | |
| All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) | | | | | | |
| Location Where Filed: | NONE | Case Number: | Date Filed: | | | |
| Location Where Filed: | N.A. | Case Number: | Date Filed: | | | |
| Pending Ba | nkruptcy Case Filed by any Spouse, Partner | or Affiliate of this Debtor (If more th | an one, attach additional sheet) | | | |
| Name of Debtor: | | Case Number: Date Filed: | | | | |
| District: | | Relationship: | Judge: | | | |
| (To be completed i | Exhibit A Exhibit B (To be completed if debtor is required to file periodic reports (e.g., forms whose debts are primarily consumer debts) | | | | | |
| 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11) I, the attorney for the petitioner named in the foregoing petition, declare that I have infer the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, Us States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by § 342(b) of the Bankruptcy Code. | | | | | | |
| Exhibit A i | s attached and made a part of this petition. | X /s/ Steven A. Leahy Signature of Attorney for Debtor(s) | 08/04/07 Date | | | |
| | | | | | | |
| l _ | Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No | | | | | |
| | Ext | nibit D | | | | |
| | by every individual debtor. If a joint petition is filed, each | spouse must complete and attach a separate Ex | thibit D.) | | | |
| 🚺 Exhibit D | completed and signed by the debtor is attached and made a | a part of this petition. | | | | |
| If this is a joint pe | tition: | | | | | |
| Exhibit D | also completed and signed by the joint debtor is attached a | and made a part of this petition. | | | | |
| | | arding the Debtor - Venue | | | | |
| ゼ | Debtor has been domiciled or has had a residence, princi immediately preceding the date of this petition or for a lo | pal place of business, or principal assets in this | | | | |
| | There is a bankruptcy case concerning debtor's affiliate, | general partner, or partnership pending in this I | District. | | | |
| | Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United Sates in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. | | | | | |
| | Statement by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) | | | | | |
| | Landlord has a judgment for possession of debtor's resid | lence. (If box checked, complete the following | .) | | | |
| | (Name of landlord or lessor that obtained judgment) | | | | | |
| | (Address | of landlord or lessor) | | | | |
| | Debtor claims that under applicable non bankruptcy law, cure the entire monetary default that gave rise to the judge | | | | | |
| | Debtor has included in this petition the deposit with the operiod after the filing of the petition. | court of any rent that would become due during | the 30-day | | | |

Signatures

Isabel Tirado

Document **Voluntary Petition** (This page must be completed and filed in every case) Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by § 342(b) of the Bankruptcy Code. I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. X /s/ Isabel Tirado Signature of Debtor Signature of Joint Debtor Telephone Number (If not represented by attorney) 08/04/07 Date Signature of Attorney X /s/ Steven A. Leahy Signature of Attorney for Debtor(s) STEVEN A. LEAHY 6273453 Printed Name of Attorney for Debtor(s) The Law Office of Steven A.Leahy Firm Name 150 North Michigan Avenue Address Suite 1100 Chicago, IL 60601 (312) 664-6649 Telephone Number 08/04/07 Date

Signature of a Foreign Representative of a Recognized Foreign Proceedings

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign main proceeding, and that I am authorized to file this petition.

| (Check | only one box.) |
|-------------|--|
| | I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by § 1515 of title 11 are attached. |
| | Pursuant to § 1511 of title 11United States Code, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached. |
| X (S | ignature of Foreign Representative) |
| (P | rinted Name of Foreign Representative) |
| | Date) |

Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, 2) I prepared this document for compensation, and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and, 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

| | | | _ |
|---|--|--|---|
| X | | | |
| | | | _ |

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

| _ | |
|---|---------------------------------------|
| | Signature of Authorized Individual |
| | |
| - | Printed Name of Authorized Individual |
| | |
| - | Title of Authorized Individual |

Document

Official Form 1, Exhibit D (10/06)

UNITED STATES BANKRUPTCY COURT **Northern District of Illinois**

| In re Isabel Tirado | Case No |
|---------------------|------------|
| Debtor(s) | (if known) |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.

| Official Form 1, Exh. D (10/06) – Cont. |
|---|
| □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.] |
| If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from th agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed. |
| □ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.] □ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); □ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); □ Active military duty in a military combat zone. |
| 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district. |
| I certify under penalty of perjury that the information provided above is true and correct. |
| Signature of Debtor: /s/ Isabel Tirado ISABEL TIRADO |
| Date: <u>08/04/07</u> |

FORM 6. SCHEDULES

Summary of Schedules

Schedule A - Real Property

Schedule B - Personal Property

Schedule C - Property Claimed as Exempt

Schedule D - Creditors Holding Secured Claims

Schedule E - Creditors Holding Unsecured Priority Claims

Schedule F - Creditors Holding Unsecured Nonpriority Claims

Schedule G - Executory Contracts and Unexpired Leases

Schedule H - Codebtors

Schedule I - Current Income of Individual Debtor(s)

Schedule J - Current Expenditures of Individual Debtor(s)

Unsworn Declaration under Penalty of Perjury

GENERAL INSTRUCTIONS: The first page of the debtor's schedules and the first page of any amendments thereto must contain a caption as in Form 16B. Subsequent pages should be identified with the debtor's name and case number. If the schedules are filed with the petition, the case number should be left blank

Schedules D, E, and F have been designed for the listing of each claim only once. Even when a claim is secured only in part or entitled to priority only in part, it still should be listed only once. A claim which is secured in whole or it part should be listed on Schedule D only, and a claim which is entitled to priority in whole or in part should be listed on Schedule E only. Do not list the same claim twice. If a creditor has more than one claim, such as claims arising from separate transactions, each claim should be scheduled separately.

Review the specific instructions for each schedule before completing the schedule.

| Form | B6/ |
|-------|-----|
| (10/0 | -\ |

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| In re | Isabel Tirado | Case No. | |
|-------|---------------|----------|------------|
| | Debto | | (If known) |

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C – Property Claimed as Exempt.

| DESCRIPTION AND LOCATION OF PROPERTY | NATURE OF DEBTOR'S INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | AMOUNT OF SECURED CLAIM |
|---|--|--------------------------------------|--|-------------------------------|
| NONE | | | | |
| | | | | |
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(Report also on Summary of Schedules.)

In re <u>Isabel Tirado</u>

Debtor

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Case No. _

Desc Main

(If known)

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| | | |
| | | |

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

| TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|---|------------------|---|-----------------------------------|--|
| Cash on hand. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | X | CHCKING ACCOUNTS 5307489087 LASALLE BANK 1565 N, CLYBORN CHICAGO, IL 60610 | | 83.00 |
| 3. Security deposits with public utilities, telephone companies, landlords, and others. 4. Household goods and furnishings, including audio, video, and computer equipment. | X | REFRIGERATOR RESIDENCE | | 70.00 |
| | | MICROWACE RESIDENCE | | 30.00 |
| | | COOKING UTENSILS RESIDENCE | | 10.00 |
| | | FLATWARE RESIDENCE | | 10.00 |
| | | COOKWARE RESIDENCE | | 25.00 |
| | | LIVING ROOM FURNITUREE RESIDENCE | | 30.00 |
| | | TABLES & CHAIRS | | 30.00 |

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| In re | Isabel Tirado | Case No |
|-------|---------------|---------|
| | Debtor | |

(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| | (Continuation Sheet) | | | | | |
|------------------|----------------------|---|--------------------------------------|--|--|--|
| TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | | |
| | | RESIDENCE | | | | |
| | | TELEVISION RESIDENCE | | 120.00 | | |
| | | VCR RESIDENCE | | 30.00 | | |
| | | VCR RESIDENCE | | 20.00 | | |
| | | DVD RESIDENCE | | 60.00 | | |
| | | COMPACT DISKS RESIDENCE | | 200.00 | | |
| | | STERO EQUIMENT RESIDENCE | | 30.00 | | |
| | | BEDROOM FURNITURE RESIDENCE | | 40.00 | | |
| | | LAMPS & ACCESSORIES RESIDENCE | | 10.00 | | |
| | | COMPUTER RESIDENCE | | 150.00 | | |
| | | COMPUTER PRINTERS RESIDENCE | | 30.00 | | |
| | | CLOTHING RESIDENCE | | 400.00 | | |
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| In re | Isabel Tirado | Case No. | |
|-------|---------------|------------|--|
| | Debtor | (If known) | |

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|---|------------------|---|--------------------------------------|--|
| Books. Pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | X | | | |
| 6. Wearing apparel. | X | | | |
| 7. Furs and jewelry. | X | | | |
| Firearms and sports, photographic, and other hobby equipment. | X | | | |
| Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | X | | | |
| 10. Annuities. Itemize and name each issuer. | X | | | |
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)). | X | | | |
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | X | | | |
| Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| Interests in partnerships or joint ventures. Itemize. | X | | | |
| 15. Government and corporate bonds and other negotiable and non-negotiable instruments. | X | | | |
| 16. Accounts receivable. | X | | | |
| Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars. | X | | | |
| Other liquidated debts owing debtor including tax refunds. Give particulars. | | TAX RETURN RESIDENCE | | 2,500.00 |
| 19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust. | X | | | |
| | | | | |
| | | | | |

| In re | Isabel | Tirado |
|-------|--------|--------|

| Debtor | | |
|--------|--|--|
| | | |
| | | |

Case No. _ (If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|--|------------------|---|--------------------------------------|--|
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each. | X | | | |
| 22. Patents, copyrights, and other intellectual property. Give particulars. | X | | | |
| 23. Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. §101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories. | | VEHICLE DODGE GRAND CARAVAN 2003 RESIDENCE | | 7,500.00 |
| 26. Boats, motors, and accessories. | X | | | |
| 27. Aircraft and accessories. | X | | | |
| 28. Office equipment, furnishings, and supplies. | X | | | |
| 29. Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| 30. Inventory. | X | | | |
| 31. Animals. | X | | | |
| 32. Crops - growing or harvested. Give particulars. | X | | | |
| 33. Farming equipment and implements. | X | | | |
| 34. Farm supplies, chemicals, and feed. | X | | | |
| 35. Other personal property of any kind not already listed. Itemize. | X | | | |
| | | 0 continuation sheets attached To | al | \$ 11,378.00 |

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| In re | Isabel Tirado | Case No. | |
|-------|---------------|------------|--|
| - | Debtor | (If known) | |

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under: (Check one box)

| | 11 U.S.C. § 522(b)(2) | Check if debtor claims a homestead exemption that exceeds |
|---|-----------------------|---|
| ◩ | 11 U.S.C. § 522(b)(3) | \$136,875. |

| DESCRIPTION OF PROPERTY | SPECIFY LAW PROVIDING EACH EXEMPTION | VALUE OF CLAIMED EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION |
|-------------------------|--|----------------------------------|--|
| REFRIGERATOR | 735 I.L.C.S 5§12-1001(b) | 70.00 | 70.00 |
| MICROWACE | 735 I.L.C.S 5§12-1001(b) | 30.00 | 30.00 |
| COOKING UTENSILS | 735 I.L.C.S 5§12-1001(b) | 10.00 | 10.00 |
| FLATWARE | 735 I.L.C.S 5§12-1001(b) | 10.00 | 10.00 |
| COOKWARE | 735 I.L.C.S 5§12-1001(b) | 25.00 | 25.00 |
| LIVING ROOM FURNITUREE | 735 I.L.C.S 5§12-1001(b) | 30.00 | 30.00 |
| TABLES & CHAIRS | 735 I.L.C.S 5§12-1001(b) | 30.00 | 30.00 |
| TELEVISION | 735 I.L.C.S 5§12-1001(b) | 120.00 | 120.00 |
| VCR | 735 I.L.C.S 5§12-1001(b) | 30.00 | 30.00 |
| VCR | 735 I.L.C.S 5§12-1001(b) | 20.00 | 20.00 |
| DVD | 735 I.L.C.S 5§12-1001(b) | 60.00 | 60.00 |
| COMPACT DISKS | 735 I.L.C.S 5§12-1001(b) | 200.00 | 200.00 |
| STERO EQUIMENT | 735 I.L.C.S 5§12-1001(b) | 30.00 | 30.00 |
| BEDROOM FURNITURE | 735 I.L.C.S 5§12-1001(b) | 40.00 | 40.00 |
| LAMPS & ACCESSORIES | 735 I.L.C.S 5§12-1001(b) | 10.00 | 10.00 |
| COMPUTER | 735 I.L.C.S 5§12-1001(b) | 150.00 | 150.00 |
| COMPUTER PRINTERS | 735 I.L.C.S 5§12-1001(b) | 30.00 | 30.00 |
| CLOTHING | 735 I.L.C.S 5§12-1001(a) | 400.00 | 400.00 |
| | | | |
| | | | |

Offical Form B6C (10/05)

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|-------|---------------|----------|----------------|--|
| In re | Isabel Tirado | | Case No | |

Debtor Case No. ______ (If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Continuation Page)

| DESCRIPTION OF PROPERTY | SPECIFY LAW PROVIDING EACH EXEMPTION | VALUE OF CLAIMED EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION |
|-----------------------------|---|----------------------------------|--|
| TAX RETURN | 735 I.L.C.S 5§12-1001(b) 735 I.L.C.S 5§12-1001(g)(1) | 1,022.00 1,478.00 | 2,500.00 |
| CHCKING ACCOUNTS 5307489087 | 735 I.L.C.S 5§12-1001(b) | 83.00 | 83.00 |
| | | | |
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Official Form 6D (10/06)

| In re | Isabel Tirado | , | Case No. | |
|-------|---------------|----------|----------|-------------|
| | n | ahtan | | (If Imoven) |

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C §112. If a "minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT ORCOMMUNITY | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|---|----------|----------------------------------|--|------------|----------------|------------|---|---------------------------------|
| ACCOUNT NO. 1002758753 | | | Lien: PMSI in vehicle < 910 days | | | | | 8,113.00 |
| CHRYSLER FINANCIAL 5225 CROOKS RD STE 140 TROY, MI 48098 | | | | | | | 15,613.00 | 5,555 |
| | ┸ | | VALUE \$ 7,500.00 | | | | | |
| ACCOUNT NO. | | | VALUE \$ | | | | | |
| ACCOUNT NO. | | | VALUE \$ | | | | | |
| 0 continuation sheets attached | | | VALUE Ø | Sub | tota | └ | \$ 15,613.00 | \$ 8,113.00 |
| continuation sheets attached | | | (Total o | of thi | is pa Γotal | ıge) l≯ | \$ 15,613.00 | \$ 8,113.00 |

(Report total also on

(Use only on last page)

(If applicable, report Summary of Schedules) also on Statistical Summary of Certain Liabilities and Related Data.)

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Official Form 6E (4/07)

| In re_ | Isabel Tirado | | Case No. |
|--------|---------------|--------|------------|
| | I | Debtor | (if known) |

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child." and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H,""W,""J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule Individual debtors with primarily consumer debts who file a case under chapter 7 or 13 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

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adjustment.

| In re Isabel Tirado | , Case No |
|---|--|
| Debtor | (if known) |
| | |
| | |
| | |
| | |
| Certain farmers and fishermen | |
| Claims of certain farmers and fishermen, up to \$5,400* per farmer or fish | herman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). |
| | |
| Deposits by individuals | |
| Claims of individuals up to $2,425$ for deposits for the purchase, lease, were not delivered or provided. 11 U.S.C. $507(a)(7)$. | or rental of property or services for personal, family, or household use, that |
| ☐ Taxes and Certain Other Debts Owed to Governmental Units | |
| Taxes, customs duties, and penalties owing to federal, state, and local go | overnmental units as set forth in 11 U.S.C. § 507(a)(8). |
| | |
| Commitments to Maintain the Capital of an Insured Depository In | nstitution |
| Claims based on commitments to the FDIC, RTC, Director of the Office Governors of the Federal Reserve System, or their predecessors or successor U.S.C. § 507 (a)(9). | |
| ☐ Claims for Death or Personal Injury While Debtor Was Intoxicate | ed |
| Claims for death or personal injury resulting from the operation of a model alcohol, a drug, or another substance. 11 U.S.C. \S 507(a)(10). | tor vehicle or vessel while the debtor was intoxicated from using |
| | |
| | |
| | |

____ continuation sheets attached

* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of

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Official Form 6F (10/06)

| In re_ | Isabel Tirado | ······································ | Case No | |
|--------|---------------|--|---------|------------|
| | Debtor | | | (If known) |

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT ORCOMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|----------|----------------------------------|--|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 1320649 | | | | | | | |
| ARONSON FURN 3401 W 47TH ST CHICAGO, IL 60632 | | | | | | | Notice Only |
| ACCOUNT NO. 5156-2500-0089-2283 | | | | | Н | H | |
| BEST BUY REWARDZONE PO BOX 88000 BALTIMORE MD 21288-0001 | | | | | | | Notice Only |
| ACCOUNT NO. 517805235263 | | | | | | | |
| CAP ONE BK PO BOX 85520 RICHMOND, VA 23285 | | | | | | | Notice Only |
| ACCOUNT NO. 530758215676 | | | | | H | | |
| CAP ONE BK PO BOX 85520 RICHMOND, VA 23285 | | | | | | | Notice Only |
| 8continuation sheets attached | _ | | | Subt | otal | > | \$ 0.00 |
| continuation sheets attached | | | | | otal | | \$ |

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Official Form 6F (10/06) - Cont.

| In re _ | Isabel Tirado | | Case No | |
|---------|---------------|--------|---------|------------|
| | | Dobton | | (If known) |

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT ORCOMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|----------|----------------------------------|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 5178052194754640 | 1 | | | | | | |
| CAPITAL ONE, N.A. PO BOX 26625 RICHMOND, VA 23261 | | | | | | | Notice Only |
| ACCOUNT NO. 5570091784944025 | + | | | | | | |
| CAPITAL ONE, N.A. PO BOX 26625 RICHMOND, VA 23261 | | | | | | | Notice Only |
| ACCOUNT NO. 425333000011 | | | | | | | |
| CHASE 800 BROOKSEDGE BLVD WESTERVILLE, OH 43081 | | | | | | | Notice Only |
| ACCOUNT NO. 1002758753 | + | | | | | | |
| CHRYSLER FINANCIAL PO BOX 2993 MILWAUKEE, WI 53201-2993 | | | | | | | 1,104.42 |
| ACCOUNT NO. 312-618-2202/0 | + | | | | | | |
| CONSOLIDATED PUBLIC SERVICES PO BOX 7001 MATTOON, IL 61938-70014 | | | | | | | 30.72 |
| Sheet no1 of 8continuation sheets at to Schedule of Creditors Holding Unsecured | tached | | | Sub | tota | ⊢ | \$ 1,135.14 |
| Nonpriority Claims | | | | Т | ota | * | \$ |

Nonpriority Claims

Total ▶ | \$

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Official Form 6F (10/06) - Cont.

| In re | Isabel Tirado | , | Case No. | | |
|-------|---------------|---|----------|------------|--|
| | Debtor | | | (If known) | |

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT ORCOMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|----------|-------------------------------------|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 1269 | | | | | | | |
| COOK CTY ACC 2456 N CICERO AVE CHICAGO, IL 60639 | | | | | | | Notice Only |
| ACCOUNT NO. 8568073 | | | | | | | |
| CTBK/HARLEM 245 OLD COUNTRY RD MELVILLE, NY 11747 | | | | | | | Notice Only |
| ACCOUNT NO. 79450119022332096 | T | | | | | П | |
| DELL FINANCIAL SVCS/CI 12234 N IH 35 SB BLDG B AUSTIN, TX 78753 | | | | | | | Notice Only |
| ACCOUNT NO. 4071760002007289 | | | | | | | |
| FCNB/MASTERTRUST 1620 DODGE ST OMAHA, NE 68102 | | | | | | | 810.00 |
| ACCOUNT NO. 5421160011239441 | | | | | | Н | |
| FCNB/MASTERTRUST 1620 DODGE ST OMAHA, NE 68102 | | | | | | | Notice Only |
| Sheet no. 2 of 8 continuation sheets attated to Schedule of Creditors Holding Unsecured | ched | | | Sub | tota | L l≯ | \$ 810.00 |

Nonpriority Claims

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Official Form 6F (10/06) - Cont.

| In re_ | Isabel Tirado | | Case No | |
|--------|---------------|--------|---------|------------|
| | | Dobtor | | (If known) |

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CCOUNT NO. 5178007135562163 FIRST PREMIER BANK 601 S MINNESOTA AVE 61OUX FALLS, SD 57104 CCCOUNT NO. 5438570002724600 | | | | |
|--|--------|----------|---|-------------|
| 501 S MINNESOTA AVE SIOUX FALLS, SD 57104 | | | ı | I |
| ACCOUNT NO. 5438570002724600 | | | | Notice Only |
| | | | | |
| HSBC NV PO BOX 19360 PORTLAND, OR 97280 | | | | Notice Only |
| ACCOUNT NO. 5489550052102251 | \top | t | T | |
| HSBC NV PO BOX 19360 PORTLAND, OR 97280 | | | | Notice Only |
| ACCOUNT NO. 5156-2500-0089-2283 | + | | t | |
| HSBC NV PO BOX 19360 SALINAS, CA 93901 | | | | 4,958.00 |
| ACCOUNT NO. 606856807333508 | | \vdash | H | |
| HSBC/HARLM 1700 SANDERS RD PROSPECT HEIGHTS, IL 60070 | | | | Notice Only |

Nonpriority Claims

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Official Form 6F (10/06) - Cont.

| In re _ | Isabel Tirado | , | Case No | |
|---------|---------------|--------|---------|------------|
| | | Debtor | | (If known) |

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT ORCOMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|----------|----------------------------------|---|------------|--------------|----------------|-----------------------|
| ACCOUNT NO. 26701424 | | | | | | | |
| KIAFS 9009 CAROTHERS PKWY STE FRANKLIN, TN 37067 | | | | | | | 14.00 |
| ACCOUNT NO. 132807402435841 | | | | | | | |
| LASALLE NATIONAL N A 3985 N MILWAUKEE AVE CHICAGO, IL 60641 | | | | | | | Notice Only |
| ACCOUNT NO. 4120613054190183 | | | Consideration: Credit card debt | | | | |
| MERRICK BANK PO BOX 5000 DRAPER, UT 84020 | 1 | | | | | | 2,100.00 |
| ACCOUNT NO. 655869 | | | | | | | |
| NATIONWIDE ACCEPTANCE 3435 N CICERO AVE CHICAGO, IL 60641 | | | | | | | Notice Only |
| ACCOUNT NO. 5770917214816873 | | | | | | | |
| NEWPORT NEWS 101 CROSSWAY PARK WEST WOODBURY, NY 11797 | | | | | | | Notice Only |
| Sheet no. 4 of 8 continuation sheets att to Schedule of Creditors Holding Unsecured | ached | | | Sub | tota | ≻ | \$ 2,114.00 |
| Nonpriority Claims | | | | т | 'otal | | \$ |

Nonpriority Claims

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Official Form 6F (10/06) - Cont.

| In re _ | Isabel Tirado | , | Case No | |
|---------|---------------|----------|---------|--------------|
| | | Dobtor | | (If known) |

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT ORCOMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|----------|-------------------------------------|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 401782 | | | | | | | |
| NEWPORT NEWS CARD PROCESSING CE OLD BETHPAGE, NY 11804 | | | | | | | Notice Only |
| ACCOUNT NO. 450003442 | | | | | | H | |
| PEOPLES ENGY 130 E RANDOLPH CHICAGO, IL 60601 | | | | | | | Notice Only |
| ACCOUNT NO. 29203436702900000 | | | | | | | |
| POPULAR CLUB 22 LINCOLN PLACE GARFIELD, NJ 07026 | | | | | | | Notice Only |
| ACCOUNT NO. 979016796210006 | + | | | | | | |
| SALLIE MAE SERVICING 1002 ARTHUR DR LYNN HAVEN, FL 32444 | | | | | | | 12,791.00 |
| ACCOUNT NO. 3585425791026 | | | | | | H | |
| SALLIE MAE SERVICING 1002 ARTHUR DR LYNN HAVEN, FL 32444 | | | | | | | Notice Only |

Nonpriority Claims

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Official Form 6F (10/06) - Cont.

| In re _ | Isabel Tirado | , | Case No | |
|---------|---------------|----------|---------|--------------|
| | | Dobtor | | (If known) |

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT ORCOMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|----------|-------------------------------------|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 17870462 | | | | | | | |
| SEARS/CBSD PO BOX 6189 SIOUX FALLS, SD 57117 | | | | | | | Notice Only |
| ACCOUNT NO. 3915161750 | t | | | | | \vdash | |
| SPIEGEL 101 CROSSWAY PARK WEST WOODBURY, NY 11797 | | | | | | | Notice Only |
| ACCOUNT NO. 3585425791032 | | | Consideration: STUDENT LOANS | | | | |
| STUDENT LOAN MKT ASSN 2000 BLUFFS DR LAWRENCE, KS 66044 | | | | | | | 2,715.00 |
| ACCOUNT NO. 3585425791042 | T | | Consideration: STUDENT LOANS | | | | |
| STUDENT LOAN MKT ASSN 2000 BLUFFS DR LAWRENCE, KS 66044 | | | | | | | 2,407.00 |
| ACCOUNT NO. 172792 | T | | | | | \vdash | |
| THE CREDIT NETWORK PO BOX 283 SYACUSE NY 11791 | | | | | | | Notice Only |
| Sheet no6 of 8continuation sheets atta to Schedule of Creditors Holding Unsecured | ched | | | Sub | tota | l> | \$ 5,122.00 |

Nonpriority Claims

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Official Form 6F (10/06) - Cont.

| In re _ | Isabel Tirado | | Case No | |
|---------|---------------|--------|---------|------------|
| | | Debtor | | (If known) |

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT ORCOMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|----------|-------------------------------------|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. 1862689530 WASH MUTUAL/PROVIDIAN PO BOX 9180 PLEASANTON, CA 94566 | | | | | | | Notice Only |
| ACCOUNT NO. 2497476806 WASH MUTUAL/PROVIDIAN PO BOX 9180 PLEASANTON, CA 94566 | | | | | | | Notice Only |
| ACCOUNT NO. 6342154377 WASHMTL/PROV POB 660509 DALLAS, TX 75266 | - | | CREDIT CARD | | | | 0.00 |
| ACCOUNT NO. 792748931 WFNNB/LANE BRYANT 4590 E BROAD ST COLUMBUS, OH 43213 | | | | | | | Notice Only |
| ACCOUNT NO. 149144917 WFNNB/THE AVENUE PO BOX 2974 SHAWNEE MISSION, KS 66201 | | | | | | | Notice Only |

Total ▶ \$

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Official Form 6F (10/06) - Cont.

| In re _ | Isabel Tirado | , | Case No | |
|---------|---------------|----------|---------|--------------|
| | | Dobtor | | (If known) |

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT ORCOMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|----------|-------------------------------------|---|------------|--------------|---------------|-----------------------|
| ACCOUNT NO. 515774 | | | | | | | |
| WIX AUTO CO INC 3401 N CICERO AVE CHICAGO, IL 60641 | | | | | | | Notice Only |
| ACCOUNT NO. | | | | | | H | |
| | | | | | | | |
| | | | | | | | |
| ACCOUNT NO. | 1 | | | | | | |
| | 1 | | | | | | |
| | | | | | | | |
| ACCOUNT NO. | | | | | | П | |
| | | | | | | | |
| | | | | | | | |
| ACCOUNT NO. | T | | | | | Н | |
| | 1 | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Sheet no8 of _8 continuation sheets att to Schedule of Creditors Holding Unsecured | ached | | | Sub | tota | l > | \$ 0.00 |

Nonpriority Claims

26,930.14

Official Form B6G (10/05)

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| n re | Isabel Tirado | Case No. | |
|------|---------------|----------|------------|
| | Debtor | | (if known) |

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child." and do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT. | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST, STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY, STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
|---|--|
| AT&T 225 W. Randolph St., Floor 27A Chicago, IL 60606 | Cell Phone |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

Bankruptcy2007 @1991-2007, New Hope Software, Inc., ver. 4.2.3-694 - 31557 - Adobe PDF

| Official | Form | B6F |
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| (10/05) | | |

| Case | 07-14044 |
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(if known)

Desc Main

| In re | Isabel Tirado | | Case No. | |
|-------|---------------|--------|----------|--|
| | | Debtor | | |

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child." See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

| • | |
|---|--|
| ٧ | |

Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|------------------------------|------------------------------|
| | |
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| In re_ | Isabel Tirado | Coco | | |
|--------|---------------|-----------|------------|--|
| | Debtor | — Case —— | (if known) | |

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

| Debtor's Marital | DEPENDENTS OF DEBTOR AND SPOUSE | | | | | |
|---|---|---|--|--|--|--|
| Status: Single | RELATIONSHIP(S): S, S, S | | AGE(S): 12 | , 11, 4 | | |
| Employment: Occupation | DEBTOR | | SPOUSE | | | |
| Name of Employer | JEFFERY DENTAL CENTER | | | | | |
| How long employed | | | | | | |
| Address of Employer | 7615 S. JEFFERY | | N.A. | | | |
| | CHICASGO, IL 60622 | | | | | |
| NCOME: (Estimate of ave | erage or projected monthly income at time case filed) | | DEBTOR | SPOUSE | | |
| . Current monthly gross v (Prorate if not paid m | wages, salary, and commissions | | \$2,504.55 | \$N.A. | | |
| . Estimated monthly over | | | \$0.00 | \$N.A. | | |
| . SUBTOTAL | | | \$ 2,504.55 | \$N.A. | | |
| . LESS PAYROLL DEDU | JCTIONS | | | | | |
| a. Payroll taxes and sob. Insurancec. Union Duesd. Other (Specify: | ocial security |) | \$ 552.37 \$ 0.00 \$ 0.00 \$ 0.00 | \$ N.A. \$ N.A. \$ N.A. \$ N.A. | | |
| . SUBTOTAL OF PAYRO | OLL DEDUCTIONS | | \$552.37 | \$N.A. | | |
| TOTAL NET MONTH | LY TAKE HOME PAY | | \$1,952.18 | \$N.A. | | |
| . Regular income from op (Attach detailed stateme | peration of business or profession or farm | | \$0.00 | \$N.A. | | |
| . Income from real prope | | | \$0.00 | \$N.A. | | |
| Interest and dividends | | | \$0.00 | \$N.A | | |
| Alimony, maintenand debtor's use or that of d | ce or support payments payable to the debtor for the dependents listed above. | ; | \$0.00 | \$N.A | | |
| Social security or othe (Specify) | r government assistance | | \$0.00 | \$N.A | | |
| 2. Pension or retirement i | income | | \$0.00 | \$N.A. | | |
| 3. Other monthly income | | | \$0.00 | \$N.A | | |
| (Specify) | | | \$0.00 | \$N.A | | |
| 4. SUBTOTAL OF LINE | S 7 THROUGH 13 | | \$0.00 | \$N.A | | |
| 5. AVERAGE MONTHL | Y INCOME (Add amounts shown on Lines 6 and 14) | | \$1,952.18 | \$N.A. | | |
| | GE MONTHLY INCOME (Combine column totals s only one debtor repeat total reported on line 15.) | | \$ | 1,952.18_ | | |
| | , | | Summary of Schedules mmary of Certain Liabi | | | |

| 17. | Describ | be any inc | crease or | decrease | in income | reasonabl | y anticipate | ed to occ | ur within th | ne year f | ollowing | the filing | g of this | document |
|-----|---------|------------|-----------|----------|-----------|-----------|--------------|-----------|--------------|-----------|----------|------------|-----------|----------|
| | | | | | | | | | | | | | | |

| None | | | |
|------|--|--|--|
| | | | |
| | | | |
| | | | |

| Official Form 6J (10/06) Case 07-14044 | Doc 1 | | | Desc Main |
|--|-------|----------|---------------|-----------|
| | | Document | Page 29 of 54 | |

| In re | Isabel Tirado | Case No. | |
|-------|---------------|------------|--|
| _ | Debtor | (if known) | |

| SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL | DEBTO | R(S) |
|---|-------------------|--------------|
| Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. | or's family at ti | ime case |
| Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate labeled "Spouse." | te schedule of e | expenditures |
| 1. Rent or home mortgage payment (include lot rented for mobile home) | \$ | 650.00 |
| a. Are real estate taxes included? YesNo | | |
| b. Is property insurance included? Yes No | | |
| 2. Utilities: a. Electricity and heating fuel | \$ | 60.00 |
| b. Water and sewer | \$ | 0.00 |
| c. Telephone | \$ | 200.00 |
| d. Other | \$ | 0.00 |
| 3. Home maintenance (repairs and upkeep) | \$ | 0.00 |
| 4. Food | \$ | 300.00 |
| 5. Clothing | \$ | 50.00 |
| 6. Laundry and dry cleaning | \$ | 20.00 |
| 7. Medical and dental expenses | \$ | 0.00 |
| 7. Medical and dental expenses 8. Transportation (not including car payments) 9. Recreation, clubs and entertainment, newspapers, magazines, etc. 10. Charitable contributions 11. Insurance (not deducted from wages or included in home mortgage payments) a. Homeowner's or renter's b. Life c. Health d. Auto | \$ | 140.00 |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc. | \$ | 0.00 |
| 10.Charitable contributions | \$ | 0.00 |
| 11.Insurance (not deducted from wages or included in home mortgage payments) | | |
| a. Homeowner's or renter's | \$ | 0.00 |
| b. Life | \$ | 0.00 |
| c. Health | \$ | 0.00 |
| n d.Auto | \$ | 0.00 |
| e. Other | \$ | 0.00 |
| 12.Taxes (not deducted from wages or included in home mortgage payments) | | |
| Specify | \$ | 0.00 |
| ½ 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) | | |
| a. Auto | \$ | 532.00 |
| b. Other | | 0.00 |
| a. Auto b. Other c. Other 14. Alimony, maintenance, and support paid to others | \$ | 0.00 |
| 14. Alimony, maintenance, and support paid to others | \$ | 0.00 |
| s 15. Payments for support of additional dependents not living at your nome | \$ | 0.00 |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) | \$ | 0.00 |
| \$ 17. Other | <u>\$</u> | 0.00 |
| § 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, | \$ | 1,952.00_ |
| gif applicable, on the Statistical Summary of Certain Liabilities and Related Data) | 6.1: 1 | |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing | of this docum | ent: |
| None | | |
| | | |
| 20. STATEMENT OF MONTHLY NET INCOME | | |
| 20. STATEMENT OF MONTHLY NET INCOME | ø | 1.052.15 |
| a. Average monthly income from Line 15 of Schedule I | \$ | 1,952.18 |
| b. Average monthly expenses from Line 18 above | \$ | 1,952.00_ |

____0.18_

c. Monthly net income (a. minus b.)

Official Form 6 - Summary (10/06)

United States Bankruptcy Court

Northern District of Illinois

| In re | Isabel Tirado | | Case No. | |
|-------|---------------|-----|-----------|---|
| | Debt | tor | | |
| | | | Chapter _ | 7 |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

AMOUNTS SCHEDULED

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|---|----------------------|---------------|--------------|--------------|-------------|
| A – Real Property | YES | 1 | \$ 0.00 | | |
| B – Personal Property | YES | 4 | \$ 11,378.00 | | |
| C – Property Claimed as exempt | YES | 2 | | | |
| D – Creditors Holding Secured Claims | YES | 1 | | \$ 15,613.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | YES | 2 | | \$ 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | YES | 9 | | \$ 26,930.14 | |
| G - Executory Contracts and Unexpired Leases | YES | 1 | | | |
| H - Codebtors | YES | 1 | | | |
| I - Current Income of Individual Debtor(s) | YES | 1 | | | \$ 1,952.18 |
| J - Current Expenditures of Individual Debtors(s) | YES | 1 | | | \$ 1,952.00 |
| тот | 23 | \$ 11,378.00 | \$ 42,543.14 | | |

Official Energy (FMCO) 08/04/07 Entered 08/04/07 16:55:37 United States Bankruptcy Court Northern District of Illinois Desc Main

| In re | Isabel Tirado | Case No |
|-------|---------------|-----------|
| | Debtor | |
| | | Chapter 7 |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. §101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount | |
|---|--------|---|
| Domestic Support Obligations (from Schedule E) | \$ 0.0 | 0 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) (whether disputed or undisputed) | \$ 0.0 | 0 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) | \$ 0.0 | 0 |
| Student Loan Obligations (from Schedule F) | \$ 0.0 | 0 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | \$ 0.0 | 0 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | \$ 0.0 | 0 |
| TOTAL | \$ 0.0 | 0 |

State the Following:

| State the Lond wing. | | |
|--|----|----------|
| Average Income (from Schedule I, Line 16) | \$ | 1,952.18 |
| Average Expenses (from Schedule J, Line 18) | \$ | 1,952.00 |
| Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20) | \$ | 2,504,55 |
| | | 2,304.33 |

State the Following:

| State the Lond wing. | | |
|--|---------|-----------------|
| Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | \$ 8,113.00 |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column. | \$ 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | \$ 0.00 |
| 4. Total from Schedule F | | \$ 26,930.14 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | \$ 35,043.14 |

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| In re | Isabel Tirado | Case No. |
|-------|---------------|------------|
| - | Debtor | (If known) |

DECLARATION CONCERNING DEBTOR'S SCHEDULES

| DECLARATION UNDER | R PENALTY OF PERJURY BY INDIVIDUAL DEBTOR |
|--|--|
| I declare under penalty of perjury that I have read summary page plus 2), and that they are true and correct to t | the foregoing summary and schedules, consisting of _25 sheets (total shown of the best of my knowledge, information, and belief. |
| Date 08/04/07 | Signature: /s/ Isabel Tirado |
| | Debtor: |
| Date | Signature: Not Applicable |
| | (Joint Debtor, if any) |
| | [If joint case, both spouses must sign.] |
| DECLARATION AND SIGNATURE OF NON-A | -ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) |
| compensation and have provided the debtor with a copy of this 110(h) and 342(b); and, (3) if rules or guidelines have been pro | otcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for s document and the notices and information required under 11 U.S.C. §§ 110(b), romulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeal to of the maximum amount before preparing any document for filing for a debtor or |
| Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer | Social Security No. (Required by 11 U.S.C. § 110.) |
| If the bankruptcy petition preparer is not an individual, state the name, tits who signs this document. | tle (if any), address, and social security number of the officer, principal, responsible person, or parti |
| Address X | |
| Signature of Bankruptcy Petition Preparer | Date |
| Names and Social Security numbers of all other individuals who prepared of | or assisted in preparing this documen, unless the bankruptcy petition preparer is not an individualt: |
| If more than one person prepared this document, attach additional signed s | sheets conforming to the appropriate Official Form for each person. |
| 18 U.S.C. § 156. | and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 1 |
| DECLARATION UNDER PENALTY OF PER | RJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP |
| I, the [the press or an authorized agent of the partnership] of the | sident or other officer or an authorized agent of the corporation or a member [corporation or partnership] named as debtor the foregoing summary and schedules, consisting ofsheets (total trect to the best of my knowledge, information, and belief. |
| Date | Signature: |
| | [Print or type name of individual signing on behalf of debtor.] |
| [An individual signing on behalf of a partnersh | hip or corporation must indicate position or relationship to debtor.] |

(04/07)Case 07-14044

Doc 1 Filed 08/04/07 Entered 08/04/07 16:55:37 UNITED STATES BARNIJERS BARNIJERS COURT Desc Main

Northern District of Illinois

| In Re | Isabel Tirado | Case No. |
|-------|---------------|------------|
| _ | | (if known) |

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. Do not include the name or address of a minor child in this statement. Indicate payments, transfers and the like to minor children by stating "a minor child." See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or selfemployed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| | AMOUNT | SOURCE |
|------|----------|--------|
| 2007 | 11727.44 | |
| 2006 | 24268.8 | |
| 2005 | 22242.82 | |

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

None

3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF PAYMENTS

AMOUNT PAID AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,475. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATES OF PAYMENTS

AMOUNT PAID AMOUNT STILL OWING

None



c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED DATE OF SEIZURE DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSESSION, FORECLOSURE SALE, TRANSFER OR RETURN DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and Receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER DATE OF ORDER

DESCRIPTION AND VALUE OF PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY DATE OF GIFT DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

Steven A. Leahy Law Office of Steven Leahy 150 N. Michigan Avenue Suite 1100 Chicago, IL 60601

THE CREDIT NETWORK PO BOX 283 SYACUSE NY 11791 7/13-6/7/2007

1500.

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

None

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF AMOUNT OF SETOFF

14. Property held for another person

None |

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

 \boxtimes

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Sites

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

 \boxtimes

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None

SITE NAME NAME AND ADDRESS DATE OF ENVIRONMENTAL AND ADDRESS OF GOVERNMENTAL UNIT NOTICE LAW

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

NAME

TAXPAYER I.D. NO. (EIN) **ADDRESS**

NATURE OF BUSINESS BEGINNING AND ENDING DATES

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME

ADDRESS

[Questions 19 - 25 are not applicable to this case]

* * * * * *

Case 07-14044

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Desc Main

[If completed by an individual or individual and spouse] I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct. 08/04/07 /s/ Isabel Tirado Date Signature of Debtor ISABEL TIRADO CERTIFICATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Social Security No. Printed or Typed Name of Bankruptcy Petition Preparer (Required by 11 U.S.C. § 110(c).) Address

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

Date

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. §156.

continuation sheets attached

Form B8 (Official Form 8) Case 07-14044 Doc 1 Filed 08/04/07 Entered 08/04/07 16:55:37 Desc Main Document Page 41 of 54 UNITED STATES BANKRUPTCY COURT Northern District of Illinois

| , | Case No. |
|-------|----------|

| | Debtor | | Chapter | 7 | |
|---------------------------------|---|--|-------------------------------------|--|---|
| CHA | APTER 7 INDIVIDUAL DEB | TOR'S STATEM | MENT OF INTE | NTION | |
| I have filed a schedule | of assets and liabilities which incl of executory contracts and unexpi wing with respect to the property of | red leases which inc | cludes personal proj | perty subject to an i | - |
| Description of Secured Property | Creditor's Name | Property will be Surrendered | Property is claimed as exempt | Property will be redeemed pursuant to 11 U.S.C. § 722 | Debt will be Reaffirmed pursuant to 11 U.S.C. § 524(c) |
| VEHICLE DODGE GRAND | CHRYSLER FINANCIA | | V | √ | |
| | | | | | |
| | | | | | |
| | 1 | ' I | ' I | ' | ' |
| Description of Leased Property | Lessor's Name | Lease will be assumed pursuant to 11 U.S.C. § 362(h)(1)(A) | | | |
| NONE | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Date: | /s/ Isabel Ti | | | | |
| | Signature of | Debtor IS | SABEL TIRADO | | |

Isabel Tirado

In re

Bankruptcy2007 @1991-2007, New Hope Software, Inc., ver. 4.2.3-694 - 31557 - Adobe PDF

CERTIFICATION OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

| I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as and have provided the debtor with a copy of this document and the notices and require have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for serventice of the maximum amount before preparing any document for filing for a debtor of the servential of | red under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines vices chargeable by bankruptcy petition preparers, I have given the debtor |
|---|---|
| Printed or Typed Name of Bankruptcy Petition Preparer | Social Security No. (Required by 11 U.S.C. § 110(c).) |
| If the bankruptcy petition preparer is not an individual, state the name, principal responsible person or partner who signs this document. | title (if any), address, and social security number of the officer, |
| Address | |
| X Signature of Bankruptcy Petition Preparer | Date |
| Names and Social Security Numbers of all other individuals who prepared o preparer is not an individual: | or assisted in preparing this document unless the bankruptcy petition |
| If more than one person prepared this document, attach additional signed she | eets conforming to the appropriate Official Form for each person. |

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. §156.

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UNITED STATES BANKRUPTCY COURT Northern District of Illinois

NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

this notice required by § 342(b) of the Bankruptcy Code.

- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of periury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor

| Printed Name and title, if any, of Bankruptcy Petition Preparer Address: | Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security |
|--|--|
| | number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.) (Required |
| X | by 11 U.S.C. § 110.) |
| Signature of Bankruptcy Petition Preparer or officer, | |
| principal, responsible person, or partner whose Social | |
| Security number is provided above. | |

Certificate of the Debtor

I (We), the debtor(s), affirm that I (we) have received and read this notice.

| Isabel Tirado | x/s/ Isabel Tirado | 08/04/07 |
|------------------------------|-----------------------------------|----------|
| Printed Name(s) of Debtor(s) | Signature of Debtor Date | |
| Case No. (if known) | X | |
| | Signature of Joint Debtor (if any |) Date |

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ARONSON FURN
3401 W 47TH ST
CHICAGO, IL 60632

AT&T
225 W. RANDOLPH ST., FLOOR 27A
CHICAGO, IL 60606

DOR 27A

BEST BUY REWARDZONE
PO BOX 88000
BALTIMORE MD
21288-0001

FRANKLIN, TN 37067

PEOPLES ENGY

CAP ONE BK CAPITAL ONE, N.A. CHASE

PO BOX 85520 PO BOX 26625 800 BROOKSEDGE BLVD RICHMOND, VA 23285 RICHMOND, VA 23261 WESTERVILLE, OH 43081

CHRYSLER FINANCIAL CHRYSLER FINANCIAL CONSOLIDATED PUBLIC

5225 CROOKS RD STE 140 PO BOX 2993 SERVICES TROY, MI 48098 MILWAUKEE, WI 53201-2993 PO BOX 7001

MATTOON, IL 61938-70014

COOK CTY ACC CTBK/HARLEM DELL FINANCIAL SVCS/CI 2456 N CICERO AVE 245 OLD COUNTRY RD 12234 N IH 35 SB BLDG B

CHICAGO, IL 60639 MELVILLE, NY 11747 AUSTIN, TX 78753

FCNB/MASTERTRUST FIRST PREMIER BANK HSBC NV 1620 DODGE ST 601 S MINNESOTA AVE PO BOX 19360

OMAHA, NE 68102 SIOUX FALLS, SD 57104 PORTLAND, OR 97280

HSBC NV HSBC/HARLM KIAFS
PO BOX 19360 2700 SANDERS RD 9009 CAROTHERS PKWY

SALINAS, CA 93901 PROSPECT HEIGHTS, IL 60070 STE

NEWPORT NEWS

LASALLE NATIONAL N A MERRICK BANK NATIONWIDE 3985 N MILWAUKEE AVE PO BOX 5000 ACCEPTANCE

CHICAGO, IL 60641 DRAPER, UT 84020 3435 N CICERO AVE CHICAGO, IL 60641

NEWPORT NEWS

101 CROSSWAY PARK WEST CARD PROCESSING CE 130 E RANDOLPH WOODBURY, NY 11797 OLD BETHPAGE, NY 11804 CHICAGO, IL 60601

POPULAR CLUB SALLIE MAE SERVICING SEARS/CBSD

22 LINCOLN PLACE 1002 ARTHUR DR PO BOX 6189 GARFIELD, NJ 07026 LYNN HAVEN, FL 32444 SIOUX FALLS, SD 57117

SPIEGEL STUDENT LOAN MKT ASSN THE CREDIT NETWORK

101 CROSSWAY PARK WEST 2000 BLUFFS DR PO BOX 283

WOODBURY, NY 11797 LAWRENCE, KS 66044 SYACUSE NY 11791

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WASH MUTUAL/PROVIDIAN WASHMTL/PROV WFNNB/LANE BRYANT PO BOX 9180 POB 660509 4590 E BROAD ST PLEASANTON, CA 94566 DALLAS, TX 75266 COLUMBUS, OH 43213

WFNNB/THE AVENUE WIX AUTO CO INC PO BOX 2974 3401 N CICERO AVE SHAWNEE MISSION, KS 66201 CHICAGO, IL 60641

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United States Bankruptcy Court Northern District of Illinois

| | | Northern Di | Strict or militors | | |
|--------|---|--|---------------------------|---|-----------|
| In | n re Isabel Tirado | | Case N | Jo | |
| | | | Chapte | er <u>7</u> | |
| D | Debtor(s) | | | | |
| | DISCLOSUR | E OF COMPENSATION OF | ATTORNEY FOR | RDEBTOR | |
| an | nd that compensation paid to m | | f the petition in bankrup | for the above-named debtor(s) otcy, or agreed to be paid to me, for s with the bankruptcy case is as follow | |
| Fo | or legal services, I have agreed | to accept | \$ | 2,000.00 | |
| Pr | rior to the filing of this statemen | t I have received | \$ | 1,201.00 | |
| Ва | alance Due | | \$ | 799.00 | |
| 2. TI | he source of compensation pai | d to me was: | | | |
| | ▼ Debtor | Other (specify) | | | |
| 3. TI | he source of compensation to b | | | | |
| | , . | Other (specify) | | | |
| 4. C | I have not agreed to share tates of my law firm. | the above-disclosed compensation | with any other person u | unless they are members and | |
| ✓ | I have agreed to share the | above-disclosed compensation with ent, together with a list of the names | a other person or pers | sons who are not members or association the compensation, is attached. | ates |
| | | d fee, I have agreed to render legal | | | |
| | | | • | or the bankruptcy case, including. nining whether to file a petition in bank | countour |
| d e | c. Representation of the debtor d. Representation of the debtor e. [Other provisions as needed] | petition, schedules, statements of a at the meeting of creditors and con in adversary proceedings and othe nt with James Glass - Attorney | firmation hearing, and a | any adjourned hearings thereof; | |
| | By agreement with the debtor(edemption motions | s), the above-disclosed fee does no | t include the following s | services: | |
| | | CERT | IFICATION | | |
| | I certify that the foregoing | r is a complete statement of any ag | reement or arrangemen | nt for payment to me for representation | on of the |
| | debtor(s) in the bankruptcy | | reement of affangemen | it for payment to me for representant | in or the |
| | 08/04/07 | | /s/ Steven A. Leah | hy | |
| | Date | | | ignature of Attorney | |
| | | | The Law Office o | of Steven A.Leahv | |

Name of law firm

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| Case <u>U</u> 7-14044 | 07 Entered 08/04/07 16:55:37 Desc Main |
|--|--|
| Official Form 22A (Chapter 7) (04/07) Document | According 48 the 5aculations required by this statement: |
| In re_ Isabel Tirado | The presumption arises. |
| Debtor(s) | $ oldsymbol{ oldsymbol{1}} oldsymbol{1} oldsymbol{2} oldsymbol{1} oldsymbol{2} oldsymbol{2} oldsymbol{3} oldsymbol{2} oldsymbol{3} oldsymbol{2} oldsymbol{3} oldsymbol{2} oldsymbol{3} oldsymbol{3} oldsymbol{4} oldsymbol{3} oldsymbol{4} oldsymbol{5} oldsymbol{6} oldsymbol{6} oldsymbol{7} oldsymbol{6} oldsymbol{7} oldsymbol{6} oldsymbol{7} oldsymbol{6} oldsymbol{7} oldsymbol{6} oldsymbol{7} oldsymbol{6} oldsymbol{7} old$ |
| Case Number: | (Check the box as directed in Parts I, III, and VI of this statement.) |
| (If known) | |

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

| | | Part I. EXCLUSION FOI | R DISABLED VETERA | NS | | | |
|---|--------------------------------|--|--|--|---|-------------------------------|----------------------------|
| 1 | Vetera the ver | are a disabled veteran described in the Veteran's Den's Declaration, (2) check the box for "The presumprification in Part VIII. Do not complete any of the resteran's Declaration. By checking this box, I declar in 38 U.S.C. § 3741(1)) whose indebtedness occur in 10 U.S.C. § 101(d)(1)) or while I was performing | otion does not arise" at the top maining parts of this statemer are under penalty of perjury the ared primarily during a period | of this nt. nat I an in whicl | s statement, a n a disabled v h I was on ac | and (3) veteran tive du | complete (as ity (as |
| | Par | t II. CALCULATION OF MONTHLY | INCOME FOR § 707(| b) (7 |) EXCLUS | SION | ı |
| | Marita | Il/filing status. Check the box that applies and co | mplete the balance of this part | of this | statement a | s direct | ted. |
| | a. 🚺 l | Jnmarried. Complete only Column A ("Debtor's | Income") for Lines 3-11. | | | | |
| | penalty living a | Married, not filing jointly, with declaration of separa of perjury: "My spouse and I are legally separated upart other than for the purpose of evading the requete only Column A ("Debtor's Income") for Lir | under applicable non-bankruplirements of § 707(b)(2)(A) of | otcy lav | w or my spous | se and | |
| 2 | c. Colum | Married, not filing jointly, without the declaration on A ("Debtor's Income") and Column B (Spous | f separate households set out se's Income) for Lines 3-11 | in Line | 2.b above. C | omple | ete both |
| | d. Lines | , | olumn | B (Spouse's Income) for | | | |
| | six cale before | res must reflect average monthly income received a endar months prior to filing the bankruptcy case, er the filing. If the amount of monthly income varied a the six-month total by six, and enter the result on t | Debtor's Spous | | olumn B couse's ncome | | |
| 3 | Gross | wages, salary, tips, bonuses, overtime, comm | issions. | | \$ 2,504.55 | \$ | N.A. |
| | Line a | ne from the operation of a business, profession and enter the difference in the appropriate column(er less than zero. Do not include any part of the as a deduction in Part V. | s) of Line 4. Do not enter a | | | | |
| 4 | a. | Gross receipts | \$ 0.00 | | | | |
| | b. | Ordinary and necessary business expenses | \$ 0.00 | | | | |
| | C. | Business income | Subtract Line b from Line a | | \$ 0.00 | \$ | N.A. |
| | in the a | nd other real property income. Subtract Line b f ppropriate column(s) of Line 5. Do not enter a num of the operating expenses entered on Line b | ber less than zero. Do not ir | | | | |
| 5 | a. | Gross receipts | \$ 0.00 | | | | |
| | b. | Ordinary and necessary operating expenses | \$ 0.00 | | | | |
| | C. | Rent and other real property income | Subtract Line b from Line a | | \$ 0.00 | \$ | N.A. |
| 6 | Intere | est, dividends and royalties. | | | \$ 0.00 | \$ | N.A. |
| 7 | Pension and retirement income. | | | | | \$ | N.A. |
| 8 | Any a exper | mounts paid by another person or entity, on a uses of the debtor or the debtor's dependents, | regular basis, for the hous including child or spousal ouse if Column B is completed | | \$ 0.00 | <u> </u> | N.A. |

| | | | Document Page 49 of | 54 | | | | _ | |
|----|--|---------|---|-----------|------|----|----------|----|----------|
| 9 | Unemployment compensation. Enter the amount in in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: | | | | | | | | |
| | | | ployment compensation claimed to penefit under the Social Security Act 0.00 Sp. 0.00 Debtor \$ 0.00 | oouse \$_ | N.A. | \$ | 0.00 | \$ | N.A. |
| 10 | Income from all other sources. If necessary, list additional sources on a separate page. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism. Specify source and amount. | | | | | | | | |
| 10 | | a. | | \$ | 0.00 | | | | |
| | | b. | | \$ | 0.00 | | | | |
| | | Tota | and enter on Line 10 | | _ | \$ | 0.00 | \$ | N.A. |
| 11 | Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s). | | | | | \$ | 2,504.55 | \$ | N.A. |
| | Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add | | | | | Ť | | Ψ. | |
| 12 | L | ine 11, | Column A to Line 11, Column B, and enter the total. If Column Eed, enter the amount from Line 11, Column A. | | | \$ | | | 2,504.55 |

| | Part III. APPLICATION OF § 707(b)(7) EXCLUSION | |
|----|--|---------------|
| 13 | Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result. | \$ 30,054.60 |
| 14 | Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) a. Enter debtor's state of residence: Illinois b. Enter debtor's household size: 4 | \$ 74,705.00 |
| 15 | Application of Section 707(b) (7). Check the applicable box and proceed as directed. The amount on Line 13 is less than or equal to the amount on Line 14. Check the "The presu not arise" box at the top of page 1 of this statement, and complete Part VIII; do not complete Parts VII. The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of statement. | IV, V, VI and |

Complete Parts IV, V, VI and VII of this statement only if required. (See Line 15).

| | Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2) | | | | | |
|----|--|----|------|--|--|--|
| 16 | Enter the amount from Line 12. | \$ | N.A. | | | |
| 17 | Marital adjustment. If you checked the box at Line 2.c, enter the amount of the income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. If you did not check box at Line 2.c, enter zero. | \$ | N.A. | | | |
| 18 | Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result. | \$ | N.A. | | | |

| | Part V. CALCULATION OF DEDUCTIONS ALLOWED UNDER § 707(b) | (2) |
|-----|---|---------|
| | Subpart A: Deductions under Standards of the Internal Revenue Service | e (IRS) |
| 19 | National Standards: food, clothing, household supplies, personal care, and miscellaneous. Enter "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable family size and income level. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | N.A. |
| 20A | Local Standards: housing and utilities; non-mortgage expenses Enter amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | N.A. |

| | | | —————————————————————————————————————— | 54 | Ī | |
|-----|------------------|--|--|---|-----|-------|
| 20B | (L 4 | mount this inf ine b t | Standards: housing and utilities; mortgage/rent expenses of the IRS Housing and Utilities Standards; mortgage/rent expenses ormation is available at www.usdoj.gov/ust/ or from the clerk of the total of the Average Monthly Payments for any debts secured by tract Line b from Line a and enter the result in Line 20B. Do not | se for your county and family size he bankruptcy court); enter on by your home, as stated in Line | | |
| 20B | ١ | a. | IRS Housing and Utilities Standards; mortgage/rental expense | \$ N.A. | | |
| | | b. | Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42 | \$ N.A. | | |
| | ┞ | C. | Net mortgage/rental expense | Subtract Line b from Line a | \$ | N.A. |
| | Ľ. | | | | ļ · | IV.A. |
| 21 | | Lines 2 Housing | Standards: housing and utilities; adjustment. If you could not solve the allowance to which you and Utilities Standards, enter any additional amount to which you be basis for your contention in the space below: | you are entitled under the IRS | | |
| | - | | | | \$ | N.A. |
| 22 | | You are operati Check rexpens 0 [Enter to the appense in the appe | Standards: transportation; vehicle operation/public e entitled to an expense allowance in this category regardless of wing a vehicle and regardless of whether you use public transportation the number of vehicles for which you pay the operating expenses es are included as a contribution to your household expenses in Ling 1 2 or more. The amount from IRS Transportation Standards, Operating Costs & Colicable number of vehicles in the applicable Metropolitan Statistical ation is available at www.usdoj.gov/ust/ or from the clerk of the base. | whether you pay the expenses of ion. or for which the operating ine 8. Public Transportation Costs for al Area or Census Region. (This | \$ | N.A. |
| 23 | o e | f vehic xpense 1 1 Enter, (availa Averag | Standards: transportation ownership/lease expense; les for which you claim an ownership/lease expense. (You may no for more than two vehicles.) 2 or more. In Line a below, the amount from IRS Transportation Standards, Coble at www.usdoj.gov/ust/ or from the clerk of the bankruptcy coule Monthly Payments for any debts secured by Vehicle 1, as stated and enter the result in Line 23. Do not enter an amount less the | t claim an ownership/lease Ownership Costs, First Car. urt). Enter in Line b the total of the I in Line 42; subtract Line b from | | |
| | ſ | a. | IRS Transportation Standards, Ownership Costs, First Car | \$ N.A. | | |
| | | b. | Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42 | \$ N.A. | | |
| | | C. | Net ownership/lease expense for Vehicle 1 | Subtract Line b from Line a | \$ | N.A. |
| | O E (t | nly if y Inter, ii availab hat Ave | Standards: transportation ownership/lease expense; ou checked the "2 or more" Box in Line 23. In Line a below, the amount from IRS Transportation Standards, Or line at www.usdoj.gov/ust/ or from the clerk of the bankruptcy coulerage Monthly Payments for any debts secured by Vehicle 2, as state a and enter the result in Line 24. Do not enter an amount le | wnership Costs, Second Car. rt). Enter in Line b the total of ated in Line 42; subtract Line b | | |
| 24 | • | a. | IRS Transportation Standards, Ownership Costs, Second Car | \$ N.A. | | |
| | | b. | Average Monthly Payment for any debts secured by Vehicle 2, | | | |
| | | | as stated in Line 42 | \$ N.A. Subtract Line b from Line a | \$ | |
| | _ | C. | Net ownership/lease expense for Vehicle 2 | | | N.A. |
| 25 | f | or all fe | Necessary Expenses: taxes. Enter the total average monthle deral, state and local taxes, other than real estate and sales taxes at taxes, social security taxes, and Medicare taxes. Do not includ | s, such as income taxes, self em- | \$ | N.A. |
| | | | Necessary Expenses: mandatory payroll deductions. | | | |
| 26 | | contrib | y payroll deductions that are required for your employment, such utions, union dues, and uniform costs. Do not include discretionatory 401(k) contributions. | | \$ | N.A. |

| On | Jiai i | OHIII | 22A (Chapter /) (04/0/Document Page 51 of 5 | 54 | | 4 |
|---|--------------------------|------------------------------------|--|--|----------|--------|
| 27 | Otl pay | her N / for te | lecessary Expenses: life insurance. Enter average montherm life insurance for yourself. Do not include premiums on your any other form of insurance. | nly premiums that you actually | \$ | N.A. |
| 28 | you | ı are r | lecessary Expenses: court-ordered payments. Enter the equired to pay pursuant to court order, such as spousal or child supayments on past due support obligations included in Line | upport payments. Do not | \$ | N.A. |
| 29 | me tha | entall t is a (| lecessary Expenses: education for employment or for y challenged child. Enter the total monthly amount that you condition of employment and for education that is required for a pd dependent child for whom no public education providing similar | actually expend for education obysically or mentally | \$ | N.A. |
| 30 | exp | end o | lecessary Expenses: childcare. Enter the average monthly n childcare—such as baby-sitting, day care, nursery and preschoonal payments. | | \$ | N.A. |
| Other Necessary Expenses: health care. Enter the average monthly amount that you actually expend on health care expenses that are not reimbursed by insurance or paid by a health savings account. Do not include payments for health insurance or health savings accounts listed in Line 34. | | | | | | N.A. |
| 32 | am ser the | ount t vice—: exter | lecessary Expenses: telecommunication services. Enter hat you actually pay for telecommunication services other than you such as cell phones, pagers, call waiting, caller id, special long dist necessary for your health and welfare or that of your dependent previously deducted. | our basic home telephone stance, or internet service—to | \$ | N.A. |
| 33 | To | tal Ex | penses Allowed under IRS Standards. Enter the total | of Lines 19 through 32 | \$ | N.A. |
| | | | Subpart B: Additional Expense Deduction Note: Do not include any expenses that you have | | | |
| | tota | al the | Insurance, Disability Insurance and Health Savings A average monthly amounts that you actually that you actually pay endents in the following categories. | | | |
| 0.4 | | a. | Health Insurance | \$ N.A. | | |
| 34 | | b. | Disability Insurance | \$ N.A. | | |
| | | C. | Health Savings Account | \$ N.A. | | |
| | | | | Total: Add Lines a, b and c | \$ | N.A. |
| 35 | mo elde | nthly (erly, c | ned contributions to the care of household or family rexpenses that you will continue to pay for the reasonable and nechronically ill, or disabled member of your household or member of pay for such expenses. | essary care and support of an | \$ | N.A. |
| 36 | Pro | otect urred | ion against family violence. Enter any average monthly exp to maintain the safety of your family under the Family Violence Prolicable federal law. The nature of these expenses is required to be | evention and Services Act or | \$ | |
| 37 | Ho Loc pro | me e al Sta | energy costs Enter the average monthly amount, in excess of the indards for Housing and Utilities that you actually expend for home your case trustee with documentation demonstrating that this reasonable and necessary. | the allowance specified by IRS e energy costs. You must | \$ | N.A. |
| 38 | exp edu wit | enses ucation t h doc | on expenses for dependent children less than 18. Ent that you actually incur, not to exceed \$137.50 per child, in provious for your dependent children less than 18 years of age. You must cumentation demonstrating that the amount claimed is reasonable accounted for in the IRS Standards. | ding elementary and secondary at provide your case trustee | \$ | N.A. |
| 39 | cloth to ex or fr | ning ex xceed om th | ral food and clothing expense. Enter the average monthly expenses exceed the combined allowances for food and apparel in five percent of those combined allowances. (This information is are clerk of the bankruptcy court.) You must provide your case trating that the additional amount claimed is reasonable and | the IRS National Standards, not vailable at www.usdoj.gov/ust/crustee with documentation | \$ | N.A. |
| 40 | | | ned charitable contributions. Enter the amount that you we of cash or financial instruments to a charitable organization as de | | \$ | N.A. |
| 41 | To | tal A | dditional Expense Deductions under § 707(b). Enter th | ne total of Lines 34 through 40. | \$ | N.A. |
| | | | | | <u> </u> | 1 N.M. |

| Offic | 1011 | 11 22A (Chapter 7) (047 | 'O'Document Page 52 of | _54 | | | |
|-------|---|---|---|---|----|------|--|
| | | Sub | ppart C: Deductions for Deb | | | | |
| | propert Averag each So Mortga | ty that you own, list the nam le Monthly Payment. The Ave ecured Creditor in the 60 mo | d claims. For each of your debts that the of creditor, identify the property seemage Monthly Payment is the total of boths following the filing of the bankruments of taxes and insurance required apage. | ecuring the debt, and state the all amounts contractually due to uptcy case, divided by 60. | | | |
| 42 | | Name of Creditor | Property Securing the Debt | Average Monthly Payment | | | |
| | a. | + | | \$ | | | |
| | b. | <u> </u> | | \$ | | ļ | |
| | C. | | | \$ | | | |
| | | | | Total: Add Lines a, b and c | \$ | N.A. | |
| 43 | primary depend pay the propert reposse | y residence, a motor vehicle, dents, you may include in you e creditor in addition to the p ty. The cure amount would in ession or foreclosure. List and nal entries on a separate pag | <u></u> | r support or the support of your the "cure amount") that you must o maintain possession of the be paid in order to avoid | | | |
| 70 | | Name of Creditor | Property Securing the Debt | | | | |
| | a. | <u> </u> | | \$ | | | |
| | b. | <u> </u> | | \$ | | | |
| | C. | <u> </u> | | Total: Add Lines a, b and c | | NT A | |
| | | | | Total. Aud Lines a, b and c | \$ | N.A. | |
| 44 | | ents on priority claims. t and alimony claims), divide | Enter the total amount of all priority ed by 60. | claims (including priority child | \$ | N.A. | |
| | Chapter 13 administrative expenses. If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense. | | | | | | |
| | a. | Projected average monthl | ly Chapter 13 plan payment. | \$ N.A. | | | |
| 45 | b. | schedules issued by the E | r district as determined under Executive Office for United States on is available at www.usdoj.gov/ust/ankruptcy court.) | N.A. | | | |
| | C. | Average monthly adminis | trative expense of Chapter 13 case | Total: Multiply Lines a and b | | N.A. | |
| 46 | Total | Deductions for Debt Pa | ayment. Enter the total of Lines 42 | through 45. | \$ | N.A. | |
| | | Subpart D: | Total Deductions Allowed (| under § 707(b)(2) | | | |
| 47 | Total | of all deductions allow | red under § 707(b)(2). Enter the | e total of Lines 33, 41, and 46. | 1. | N A | |

| | Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION | | | | | | | |
|----|---|----|------|--|--|--|--|--|
| 48 | Enter the amount from Line 18 (Current monthly income for § 707(b)(2)) | \$ | N.A. | | | | | |
| 49 | Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2)) | \$ | N.A. | | | | | |
| 50 | Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result. | \$ | N.A. | | | | | |
| 51 | 60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result. | \$ | N.A. | | | | | |

| (| Officia | al Form 22A (Chapter 7) (04/07) Filed 08/04/07 Entered 08/04/07 16:55:37 Desc | Main | |
|---|---------|--|-----------|------------|
| | | Initial presumption determination. Check the applicable box and proceed as directed. | | |
| | | The amount on Line 51 is less than \$6,575. Check the box for "The presumption does not ari page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VIII. | | ne top of |
| | 52 | The amount set forth on Line 51 is more than \$10,950. Check the "Presumption arises" be page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. D the remainder of Part VI. | | |
| | | The amount on Line 51 is at least \$6,575, but not more than \$10,950. Complete the reVI (Lines 53 through 55). | emainde | er of Part |
| | 53 | Enter the amount of your total non-priority unsecured debt | \$ | N.A. |
| | 54 | Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter | | |
| | | the result. | \$ | N.A. |
| | | Secondary presumption determination. Check the applicable box and proceed as directed. | | |
| | 55 | ☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presu arise" at the top of page 1 of this statement, and complete the verification in Part VIII. ☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the B presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You complete Part VII. | oox for ' | "The |

| 6 | a. | | Ф | |
|---|----|-----------------------------|----|------|
| b | b. | | \$ | |
| С | c. | | \$ | |
| | | Total: Add Lines a, b and c | \$ | N.A. |
| | | | | |
| | | | | |
| | | | | |

| | Pai | rt VIII: VE | ERIFICATION |
|----|--|-----------------|---|
| | I declare under penalty of perjury that the both debtors must sign.) | information pro | vided in this statement is true and correct. (If this a joint case, |
| 57 | Date: <u>08/04/07</u> | Signature: _ | /s/ Isabel Tirado (Debtor) |
| | Date: | Signature: _ | (Joint Debtor, if any) |

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| Income Month 1 | | | Income Month 2 | | |
|--------------------------------|----------|------|--------------------------------|----------|-----|
| Gross wages, salary, tips | 2,504.55 | 0.00 | Gross wages, salary, tips | 2,504.55 | 0.0 |
| Income from business | 0.00 | 0.00 | Income from business | 0.00 | 0.0 |
| Rents and real property income | 0.00 | 0.00 | Rents and real property income | 0.00 | 0.0 |
| Interest, dividends | 0.00 | 0.00 | Interest, dividends | 0.00 | 0.0 |
| Pension, retirement | 0.00 | 0.00 | Pension, retirement | 0.00 | 0.0 |
| Contributions to HH Exp | 0.00 | 0.00 | Contributions to HH Exp | 0.00 | 0.0 |
| Unemployment | 0.00 | 0.00 | Unemployment | 0.00 | 0.0 |
| Other Income | 0.00 | 0.00 | Other Income | 0.00 | 0.0 |
| Income Month 3 | | | Income Month 4 | | |
| Gross wages, salary, tips | 2,504.55 | 0.00 | Gross wages, salary, tips | 2,504.55 | 0.0 |
| Income from business | 0.00 | 0.00 | Income from business | 0.00 | 0.0 |
| Rents and real property income | 0.00 | 0.00 | Rents and real property income | 0.00 | 0.0 |
| Interest, dividends | 0.00 | 0.00 | Interest, dividends | 0.00 | 0.0 |
| Pension, retirement | 0.00 | 0.00 | Pension, retirement | 0.00 | 0.0 |
| Contributions to HH Exp | 0.00 | 0.00 | Contributions to HH Exp | 0.00 | 0.0 |
| Unemployment | 0.00 | 0.00 | Unemployment | 0.00 | 0.0 |
| Other Income | 0.00 | 0.00 | Other Income | 0.00 | 0.0 |
| Income Month 5 | | | Income Month 6 | | |
| Gross wages, salary, tips | 2,504.55 | 0.00 | Gross wages, salary, tips | 2,504.55 | 0.0 |
| Income from business | 0.00 | 0.00 | Income from business | 0.00 | 0.0 |
| Rents and real property income | 0.00 | 0.00 | Rents and real property income | 0.00 | 0.0 |
| Interest, dividends | 0.00 | 0.00 | Interest, dividends | 0.00 | 0.0 |
| Pension, retirement | 0.00 | 0.00 | Pension, retirement | 0.00 | 0.0 |
| Contributions to HH Exp | 0.00 | 0.00 | Contributions to HH Exp | 0.00 | 0.0 |
| Unemployment | 0.00 | 0.00 | Unemployment | 0.00 | 0.0 |
| Other Income | 0.00 | 0.00 | Other Income | 0.00 | 0.0 |

Additional Items as Designated, if any

Remarks